

CASH RECEIPTS MONETARY CONTRIBUTIONS

C3

THIS SPACE FOR OFFICE USE

Candidate or Committee Name (Do not abbreviate. Use full name.)

IRONS DAVID W JR

09/10/2003

Mailing Address 3020 ISSQ PINE LK RD, PMB 13

City Zip + 4 Office Sought (candidates)
SAMMAMISH WA 98075 COUNTY COUNCIL

Date Received						Amount	Total
	a. Anonymous\$				0.00 \$	0.00	
	b. Candidate's personal funds deposited in the bank (include candidate loans in 1c)					0.00 \$	0.00
						0.00	
						0.00	
e. Small contributions \$25.00 or less not itemized and number of persons giving (persons) 3. 2. CONTRIBUTIONS OVER \$25.00					ıs) <u></u>	70.00	
2. CONTRIBUTE Date Received	ONS OVER \$25.00 Contributor's Name, Address, City, State, Zip		tions of more than \$100:* r's Name, City and State	P R I	G E N	Amount	Aggregate [*] Total
1	OUNG LARK 7218 SE 29TH CT	SELF BELLEVUI Occupation	A WA	Х			
	ELLEVUE WA 98008		DUSEWIFE		\$	100.00 \$	100.00
	RIFT-ON-INN ROADHOUSE CASINO I 6708 AURORA AVE NORTH	Occupation	n	X			
	HORELINE WA 98133				\$	100.00 \$	100.00
	&H PACIFIC, INC.	Occupation	n	Х			
	350 MONTE VILLA PARKWAY OTHELL WA 98021				\$	250.00 \$	250.00
		Occupation	n				
		Occupation					
	_		Sub-total				**
	Check here if additional pages are attached Amount from attached pages						*See next page for
3. TOTAL FUNDS RECEIVED AND DEPOSITED OR CREDITED TO ACCOUNT \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$					520.00	details.	
4. Date of Depos	and 2 above. Enter this amount in line 1, Schedule A	10 C4.	I certify that this report is tru	e and o	comple	te to the best of mv	knowledge
2 2 2 3 2 3 2 3 2 3 2 3 2 3 2 3 2 3 2			Treasurer's Signature			Date	
Treasurer's Daytime Telephone No.:					\$	520.00	